

FOR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE:

- ☐ This is an Initial* Statement of Organization
☒ This is an amended* Statement of Organization

*An Initial Statement of Organization should be filed within 10 days of the committee's accepting contributions, making expenditures or incurring indebtedness exceeding \$750. Amendments should be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.

Rec'd Form

IA ETHICS CAMPAIGN DISCLOSURE FORM DR-1 (Rev. 01/2003)	STATEMENT OF ORGANIZATION
2009 AUG - 3	
For Office Use Only	
Comm. #	_____
Indexed	_____
Audited	_____
Computer	_____

COMMITTEE NAME

The Committee to Elect Scott Cirksema

IMPORTANT: Indicate type of committee you are reporting for:

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support slate of candidates (list candidates under purpose of committee)

COMMITTEE TREASURER

Name _____
 Mailing Address _____
 City, State Zip Code _____
 Phone () _____
 e-Mail _____

COMMITTEE CHAIR

Name _____
 Mailing Address _____
 City, State Zip Code _____
 Phone () _____
 e-Mail _____

INDICATE PURPOSE OF COMMITTEE - Check One Box ☐ Advocate for/against candidate(s) ☐ Advocate for/against ballot issue(s)
 Comment or description:

All Candidates Enter: _____ District: City of Clive Iowa
 Office Sought: Mayor Year Standing for Election: 2009
 Political Party (if applicable) _____ Date of Election: Nov. 3, 2009
 County/Local Candidates and Local Ballot/Franchise Committees Enter: _____
 County: _____

Bank Account Name

Name of Financial Institution/type of Account

Mailing Address

City State Zip

Candidate name & Address or Parent Entity (PACs, if applicable),
 Affiliate, or Sponsor

Mailing Address

City State Zip

Phone ()

e-Mail

DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION

Indicate disposition of funds by marking appropriate number in box ☐

- (1) DONATED TO _____ COUNTY CENTRAL COMMITTEE
 (2) DONATED TO _____ LOCAL/STATE/NAT'L POLITICAL PARTY (underline one)
 (3) DONATED TO CHARITABLE ORGANIZATION
 (specify) _____
 (4) CITY/COUNTY/SCHOOL/STATE OF IOWA GENERAL FUND (underline one)
 (5) PARTISAN CONGRESSIONAL DISTRICT FUND

- (6) PRORATED REFUND TO CONTRIBUTORS
 (7) TRANSFER TO ANOTHER COMMITTEE OF THIS SAME CANDIDATE
 (CANDIDATES ONLY)
 (8) RETURN TO PARENT ENTITY GENERAL FUND (PACs ONLY)
 (9) OTHER (PACs ONLY), PLEASE BE SPECIFIC

STATEMENT OF AFFIRMATION BY TREASURER AND CANDIDATE; OR POLITICAL COMMITTEES, BY CHAIRPERSON

I am aware that I am required to file disclosure reports if the committee receives contributions, makes expenditures, or incurs indebtedness in excess of \$750.00 in a calendar year to expressly advocate for any candidate or ballot issue. I understand that although the treasurer normally prepares and files reports, the candidate or chairperson (PACs) is responsible under the law for accurate and timely disclosure reports and that late-filed reports are subject to civil penalties and possible other legal action. I understand that by filing this form, I am subject to the laws found in Iowa Code chapter 56, chapter 68B and administrative rules found in chapter 361. I affirm that all committee officers have been informed of their appointment and obligations.

Scott Cirksema
 Signature of Treasurer
 Signature of Candidate, PAC, Central Committee or Local Ballot Issue Chairperson

August 1, 2009
 Date Signed
8-1-09
 Date Signed